

County: Waukesha
CLEARVIEW HOME CORPORATION
935 MAIN STREET
DELAFIELD 53018

Phone: (262) 646-3361
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/03): 12
Total Licensed Bed Capacity (12/31/03): 12
Number of Residents on 12/31/03: 6

Ownership: Nonprofit Church/Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? No
Average Daily Census: 9

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		16.7
Supp. Home Care-Personal Care	Yes					1 - 4 Years		33.3
Supp. Home Care-Household Services	No	Developmental Disabilities	.	Under 65	0.0	More Than 4 Years		16.7
Day Services	No	Mental Illness (Org./Psy)	.	65 - 74	0.0			----
Respite Care	No	Mental Illness (Other)	.	75 - 84	33.3			66.7
Adult Day Care	No	Alcohol & Other Drug Abuse	.	85 - 94	66.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	.	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	.		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	.		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	.	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	.		-----	RNs		113.3
Referral Service	No	Diabetes	.	Gender	%	LPNs		95.0
Other Services	No	Respiratory	.		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	.	Male	16.7	Aides, & Orderlies		
Mentally Ill	No		-----	Female	83.3			
Provide Day Programming for			.		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	5	83.3	200	0	0.0	0	0	0.0	5	83.3
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	1	16.7	110	0	0.0	0	0	0.0	1	16.7
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		0	0.0		0	0.0		6	100.0		0	0.0		0	0.0	6	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	64.3	Daily Living (ADL)	Independent	One Or Two Staff		
Private Home/With Home Health	3.6	Bathing	0.0	83.3	16.7	6
Other Nursing Homes	10.7	Dressing	33.3	50.0	16.7	6
Acute Care Hospitals	0.0	Transferring	33.3	66.7	0.0	6
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	33.3	50.0	16.7	6
Rehabilitation Hospitals	0.0	Eating	83.3	16.7	0.0	6
Other Locations	21.4	*****				
Total Number of Admissions	28	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	0.0		Receiving Respiratory Care	0.0
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	0.0		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	27.3	Occ/Freq. Incontinent of Bowel	0.0		Receiving Suctioning	0.0
Other Nursing Homes	12.1				Receiving Ostomy Care	0.0
Acute Care Hospitals	9.1	Mobility			Receiving Tube Feeding	0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	0.0
Rehabilitation Hospitals	0.0					
Other Locations	6.1	Skin Care			Other Resident Characteristics	
Deaths	45.5	With Pressure Sores	0.0		Have Advance Directives	0.0
Total Number of Discharges (Including Deaths)	33	With Rashes	0.0		Medications	
					Receiving Psychoactive Drugs	0.0

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer Group %	Ratio	Bed Size: Under 50 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	42.8	87.9	0.49	68.3	0.63	86.6	0.49	87.4	0.49
Current Residents from In-County	33.3	87.5	0.38	64.3	0.52	84.5	0.39	76.7	0.43
Admissions from In-County, Still Residing	0.0	22.9	0.00	13.4	0.00	20.3	0.00	19.6	0.00
Admissions/Average Daily Census	311.1	144.5	2.15	237.2	1.31	157.3	1.98	141.3	2.20
Discharges/Average Daily Census	366.7	147.5	2.49	246.9	1.49	159.9	2.29	142.5	2.57
Discharges To Private Residence/Average Daily Census	100.0	49.7	2.01	86.7	1.15	60.3	1.66	61.6	1.62
Residents Receiving Skilled Care	83.3	93.9	0.89	86.1	0.97	93.5	0.89	88.1	0.95
Residents Aged 65 and Older	100	97.1	1.03	87.0	1.15	90.8	1.10	87.8	1.14
Title 19 (Medicaid) Funded Residents	0.0	50.3	0.00	61.7	0.00	58.2	0.00	65.9	0.00
Private Pay Funded Residents	100	34.6	2.89	23.5	4.26	23.4	4.28	21.0	4.77
Developmentally Disabled Residents	.	0.6	.	0.0	.	0.8	.	6.5	0.00
Mentally Ill Residents	.	35.5	.	44.3	.	33.5	.	33.6	0.00
General Medical Service Residents	.	23.0	.	27.0	.	21.4	.	20.6	0.00
Impaired ADL (Mean)	43.3	51.9	0.84	56.9	0.76	51.8	0.84	49.4	0.88
Psychological Problems	0.0	62.2	.	50.4	.	60.6	.	57.4	0.00
Nursing Care Required (Mean)	.	7.2	.	8.9	.	7.3	.	7.3	0.00